Gynaecology held in New Delhi, on December 28—30, 1992 it was observed that maternity and neo-natal mortality rate was comparatively very high in India;

(b) if so, what was the average maternity and neo-natal mortality rates in India during the Seventh Five Year Plan; and

(c) what steps are taken to contain this high rate of mortality among women and what additional efforts are contemplated to be made in this direction during the ensuing year?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): (a) Yes, Sir.

(b) and (c) According to Sample Registration Survey Reports of the Registrar General of India, the averge neo-natal mortality rate in the Seventh plan period was 62.8 per 1000 live births ranging from 66.6 in 1985 to 56.4 in 1989. The rate in 1990 and 1991 is estimated to be 49.6 per 1000 live births. The survey reports do not provide information regarding maternal mortality rates.

The programmes undertaken by the Government to reduce maternal mortality include tetanus toxoid immunisatin, iron and folic acid tablets for pregnant women, training of traditional birth attendants, provision of disposable delivery kits to ensure clean deliveries, promotion of birth spacing and strengthening the primary health care institutions for maternal care and treatment of complications.

Isolation of Aids Virus

4155. SHRI H. HANUMANTHAPPA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to a report appeared in Hindustan Times recently that for the first time in India AIDS virus (HIV) had been isolated at the Cancer Research Institute, Bombay; and

(b) if so, what is the reaction of Government and steps taken by it to propagate the findings of the research for the benefit of the suffering masses in the country due to AIDS infection?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): (a) and (b) Yes, Sir. Earlier such claims had been made by Scientists in the All India Institute of Medical Sciences, New Delhi and National AIDS Research Institute, Pune also. Complete characterization of Indian HIV might help in indigenous development of diagnostic kits. Further and sustained research would be necessary before such developments can take place.

Use of life saving medicines in India

4156. SHRI RAMENDRA KUMAR YADAV 'RAVI': Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Indian doctors prescribe the life saving medicines to the patients which are not manufactured/marketed in India;

(b) whether Government propose to market these life saving medicines for the benefit of patients; and

(c) if so, the details thereof and if not the reasons therefor?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): (a) to (c) Doctors are free to prescribe any medicine, whether available in the country or not. Life saving medicines, not available in the country, can be imported by the individuals, hospitals and medical pactitoners.